

EXHIBIT N



FROM: David Austern
President, CRMC

DATE: September 12, 2005

RE: Suspension of Acceptance of Medical Reports

The reliability of reports prepared by the doctors and screening facilities listed below has been challenged and is the subject of federal grand jury and congressional investigations into alleged fraud. Based upon evidence presented in the silica Multidistrict Litigation (MDL), the challenge is credible and compels suspension of acceptance of these reports. In the two months since Judge Janis Jack issued her June 30, 2005 Order in the silica MDL, CRMC has received no information or evidence to support continued acceptance of reports prepared by these doctors and facilities. Pending completion of the grand jury and congressional investigations and the litigation in which the reports were challenged, CRMC will no longer accept reports prepared by these doctors and facilities.

In addition, CRMC has determined that medical reports prepared by Healthscreen, Inc., a pulmonary function testing (PFT) facility formerly located in Jackson, Mississippi (now closed), are not reliable and will no longer be accepted.

Effective immediately, CRMC will not accept reports from the following doctors and screening facilities. Their names have been removed from the e-Claims™ tables of acceptable doctors and facilities.

Dr. James Ballard	Healthscreen, Inc. (Jackson, Mississippi)
Dr. Kevin Cooper	Occupational Diagnostics
Dr. Todd Coulter	N&M, Inc.
Dr. Andrew Harron	RTS, Inc. (Mobile, Alabama)
Dr. Ray Harron	
Dr. Glynn Hilbun	
Dr. Barry Levy	
Dr. George Martindale	
Dr. W. Allen Oaks	

CRMC will not withdraw outstanding offers for claims based upon the reports of these doctors and facilities. However, claimants' only option will be to accept those offers, unless they submit new medical reports from acceptable doctors and facilities.

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While Manville Trust claimants usually may elect to accept their last offer, claimants whose *deactivated* claims were based on reports from these doctors or facilities will no longer have that option. Deactivated claims must be re-filed on the basis of new medical reports.

Claims awaiting document submission, Quality Control (QC) document submission or individual evaluation must be recategorized on the basis of new medical reports. For e-filers, claim status has been reset to awaiting categorization decision tree (CDT). For paper filers, CRMC will send claim denial letters.

Inquiries related to the suspension of these doctors and facilities should be directed to CRMC's Customer Relations Analysts at (800) 536-2722 or [customeroperations @claimsres.com](mailto:customeroperations@claimsres.com).